

Work Order ID 92577

92577

Page 1

October 31, 2012 10:49:33 AM

Item ID: 646.2900E Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Deflector
 Start Date: 10/31/12 Start Qty: 120.00 *120* Cust Item ID:
 Required Date: 12/21/12 Req'd Qty: 120.00 *120* Customer:
 Reference:

Approvals: Process Plan: CL Date: 12/10/31 Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID / Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	#	Plan Code	Accept Qty	Reject Qty	Reject Number	Inspr. Stamp
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Draw Nbr	Revision Nbr
646.2900	

100	PURCHASING	0.00							
100									
Purchasing	Memo	0.00							
Purchasing	Issue P/O: <u>18292</u>								
	a) Description: EXTRUSION								
	e) Material: 7075-T6								
	f) Material certification required								

110	Receive & Inspect for Damage & Mat'l Certs	0.00							
110									
Packaging	Memo	0.00							
Packaging	Ensure material certification is attached								

120	QC6- Inspect dimensions to drawing	0.00							
120									
QC	Memo	0.00							
Quality Control	Ensure Material certification comply to Dwg 646.2900								

CL 12/10/31 (120)

12/12/12 (144)

144 (DAS 05 2-89) 12-12-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 92577

92577

Page 2

October 31, 2012 10:49:33 AM

Item ID: 646.2900E Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Deflector
 Start Date: 10/31/12 Start Qty: 120.00 ***120*** Cust Item ID:
 Required Date: 12/21/12 Req'd Qty: 120.00 ***120*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <u>WAT 036</u>	0.00							
130									
Packaging	Memo	0.00				140			DAS 05 12-12-12
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

12/12/12 *[Signature]*
 ME
 12-12-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY										
Landing Gear			General			Grain		Other		
<input type="checkbox"/> Bending	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Cracks	<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Wave/Twist in Tube
<input type="checkbox"/> Bend	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Burrs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Countersink	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Drawing	<input type="checkbox"/> Finish	<input type="checkbox"/> Folio
<input type="checkbox"/> Grain	<input type="checkbox"/> Hardware	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Misread	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Weld	<input type="checkbox"/> Wrong Stock Pulled
							<input type="checkbox"/> Other			

Picklist Print

October 31, 2012 10:49:33 AM

Page 1

Work Order ID: 92577

Parent Item: 646.2900E

Parent Item Name: Deflector

Start Date: 10/31/12

Required Date: 12/21/12

Start Qty: 120.00

Required Qty: 120.00

Comments: IPP REV:A NEW ISSUE 12-10-30 VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
646.2900P Deflector		Manufactured	No				f	0.0000		120			

12/21/12 (124)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE 03207			SHEET 1 OF 1	
	DWG NO. 646.2900	REV: N/C	PREPARED BY PB	DATE: 08/29/11	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.
	DWG TITLE: DEFLECTOR				
	APPROVED BY:	ENGR. <i>[Signature]</i>	MFG. <i>[Signature]</i>	QC. <i>[Signature]</i>	EFF: CURRENT ORDER
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE	REASON: ADDED ALTERNATE BASE MATERIAL				

SHEET 1, ZONE A2, NOTE 1 IS:

NOTES:

1

MATERIAL: 7075-T6 ALUMINUM PER AMS-QQ-A-225/9 OR AMS-QQ-A-250/12

2

FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2,
COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER;
PRIME IAW MIL-P-23377J TYPE I CLASS N

3. DEBURR AND BREAK ALL SHARP EDGES

4. IDENTIFY IAW MPP-120

CX 12/10/31
w/0.92577

F/N	TC	PART NUMBER	QTY	DESCRIPTION				MATERIAL	SPECIFICATION
DOCUMENTS EFFECTED:				<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> ICA <input type="checkbox"/> BOM				CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

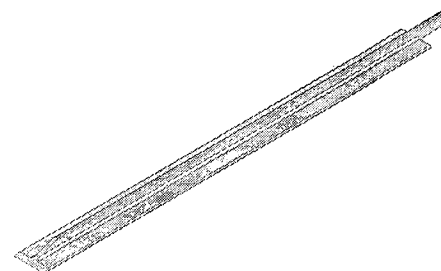
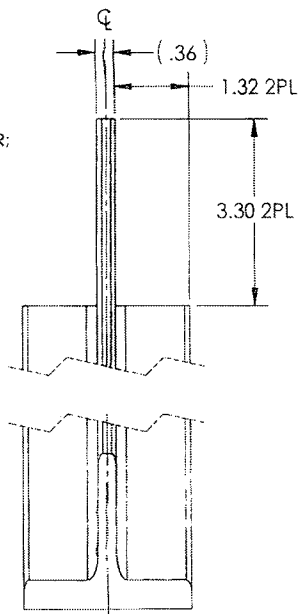
Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

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REVISIONS			
REV	DESCRIPTION	DATE	APPROVED

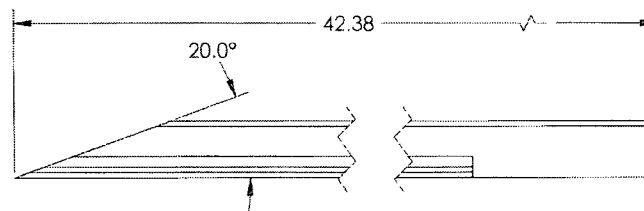
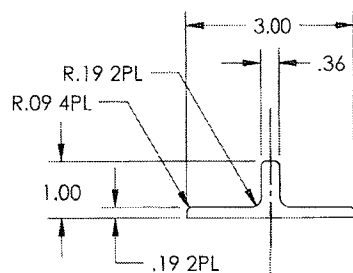
NOTES:

- 1 MATERIAL: 7075-T6 ALUMINUM PER AMS-QQ-A-225/9
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2, COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER; PRIME IAW MIL-P-23377J TYPE I CLASS N
3. DEBURR AND BREAK ALL SHARP EDGES
4. IDENTIFY IAW MPP-120



UNINCORPORATED ECN(s)

03207



646.2910

646.2910		DEFLECTOR		△	△
FIND #	PART #	DESCRIPTION	MATL	SPEC.	
QTY	PARTS LIST				
NEXT ASSY (S)	APICAL INDUSTRIES				
646.4000	2608 TEMPLE HEIGHTS DR.				
	OCEANSIDE, CA. 92056-3512 (760)724-5300				
	DEFLECTOR				
		SEE CHG CODE	DATE	REV.	
		B 07M126	646.2900	NAC	
		SCALE: NONE	SHEET 1 OF 1		

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO18292

Purchase Order Date 10/31/12

PO Print Date 11/01/12

Page Number 1 of 2

Order From :

VU-UAC001

UNIVERSAL ALLOY CORPORATION
2871 LA MESA
P.O. BOX 6316

ANAHEIM, CALIFORNIA 92816-8316
USA

Contact Name	Buyer	Chantal Lavoie
Vendor Phone	Requisition Nbr	
Vendor Fax 714-630-7207	Tax Resale Nbr	10127-2607
Vendor Account Nbr	Terms	Net 30
	Currency	USD
	FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	647.4400P	Rail	12/21/12 Yes	120.00 Each	Journey Freight	\$14.9900	\$1,798.80
		Special Inst:	AS PER DWG 647.4400E B92576 MATERIAL: 7075-T6511 AS PER AMS- QQ-A-200/11 AS PER QUOTE # 326613				
2	646.2900P	Deflector	12/21/12 Yes	120.00 Each	Journey Freight	\$18.1500	\$2,178.00
		Special Inst:	AS PER DGW 646.2900E B92577 MATERIAL: 7075-T6511 AS PER AMS- QQ-A-200/11 AS PER QUOTE # 326613				

Nec 149

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required - YES NO

Change Nbr: 4

Change Date: 11/01/12

SHIPPER NO. 406953-1	UACPART NO. 66767	UNIVERSAL ALLOY CORPORATION 2871 JOHN BALL WAY, P.O. BOX 6316, ANAHEIM, CA USA 92816-6316 (714) 630-7200 (800) 331-7772 FAX (714) 630-7207
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PRODUCTION LOTS A556397

S H DART AEROSPACE I 1270 ABERDEEN P HAWKESBURY, ONTARIO CN, K6A 1K7 T O	S O DART AEROSPACE L 1270 ABERDEEN D HAWKESBURY, ONTARIO CN, K6A 1K7 T O
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27/320

CUSTOMER'S P.O. NO. PO18292 item 2	ORDER PLACED BY CHANTAL LAVOIE	CUSTOMER'S PART NUMBER 646.2900-EXT ALUMINUM EXTRUSION
TERMS NET 60	ALLOY 7075 T6511	SPECIFICATION NO. AMS-QQ-A-200/11 REV. N/C
SHIP VIA JOURNEY FREIGHT	DATE SHIPPED 11/27/2012	FREIGHT CHARGES PREPAID <input checked="" type="checkbox"/> COLLECT <input type="checkbox"/>
SHIPMENT PARTIAL <input type="checkbox"/> COMPLETE <input checked="" type="checkbox"/>		CERTIFICATIONS ATTACHED <input checked="" type="checkbox"/> TO FOLLOW <input type="checkbox"/>

QUANTITY SHIPPED

FEET 144	PIECES X LENGTH 12 X 144.	NET PER PC 12.75	NET POUNDS 153	GROSS POUNDS 183	BOX 1 bundle of 1 fiber board with plywood caps box
RECEIVED BY X			DATE	TIME	

UNIVERSAL ALLOY CORPORATION ACCEPTS NO RESPONSIBILITY FOR ERROR IN SHIPMENT IF YOU FAIL TO NOTIFY US WITHIN 3 DAYS OF RECEIPT. NO REJECTED MATERIAL WILL BE ACCEPTED FOR CREDIT OR REPLACEMENT AFTER 30 DAYS FROM DATE OF RECEIPT.

THIS SUPPLIER HAS BEEN DELEGATED BOEING INSPECTION AUTHORITY FOR ALL PARTS MANUFACTURED UNDER CONTRACT WITH THE BOEING COMPANY

SHIPPER NO. 406953-1	UACPART NO. 66767	UNIVERSAL ALLOY CORPORATION 2871 JOHN BALL WAY, P.O. BOX 6316, ANAHEIM, CA USA 92816-6316 (714) 630-7200 (800) 331-7772 FAX (714) 630-7207
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PRODUCTION LOTS A556397

S H DART AEROSPACE I 1270 ABERDEEN P HAWKESBURY, ONTARIO CN, K6A 1K7 T O	S O DART AEROSPACE L 1270 ABERDEEN D HAWKESBURY, ONTARIO CN, K6A 1K7 T O
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27/320

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UNIVERSAL ALLOY CORPORATION

2871 JOHN BALL WAY ANAHEIM, CA 92806 (714) 630-7200

EXTRUSION MILL CERTIFICATE OF CONFORMANCE INSPECTION AND TEST REPORT

CUSTOMER DART AEROSPACE LTD

PURCHASE ORDER PO18292 item 2

DATE 11/26/12

ORDER NUMBER 406953

PART NO. 646.2900-EXT rev N/C

SPECIFICATIONS AMS-QQ-A-200/11 REV. N/C

MATERIAL 7075-T6511

MECHANICAL PROPERTIES

SAMPLE OR LOT	TEST DIRECTION	TEST LOCATION	TENSILE STRENGTH KSI	YIELD STRENGTH KSI	ELONGATION %
A556397	L		88.4	79.5	11.7

MANUFACTURED IN THE U.S.A.

CHEMICAL COMPOSITION LIMITS

ALLOY NOS	SI	FE	CU	MN	MG	CR	ZN	TI	EACH	OTHERS	TOTAL
7075	0.40	0.50	1.2-2.0	0.30	2.1-2.9	0.18-0.28	5.1-6.1	0.20	0.05		0.15

THIS IS TO CERTIFY THAT THE MATERIAL APPLIED TO THE ABOVE ORDER COVERED BY THIS REPORT HAS BEEN INSPECTED IN ACCORDANCE WITH THE SPECIFICATIONS DESCRIBED FORMING A PART OF THIS ORDER AND THAT REPRESENTATIVE MATERIAL HAS BEEN TESTED AND FOUND TO MEET THE APPLICABLE REQUIREMENTS. FURTHER SHOWN ARE THE COMPOSITION LIMITS AND MECHANICAL PROPERTY TEST RESULTS. DOCUMENTATION VERIFYING CONFORMANCE TO THESE REQUIREMENTS IS ON FILE AND SUBJECT TO EXAMINATION.

PERCENT MAXIMUM UNLESS SHOWN OTHERWISE
REMAINDER ALUMINUM

UNIVERSAL ALLOY CORPORATION



Ricardo Gallegos - Quality Engineer Manager
QUALITY ASSURANCE DEPARTMENT

